



MONTANA BOARD OF OCCUPATIONAL THERAPY  
PRACTICE  
301 S PARK, P O BOX 200513  
HELENA, MT 59602  
406-841-2385

License No. \_\_\_\_\_  
Renew Date: \_\_\_\_\_  
Status: \_\_\_\_\_  
Pin #: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ADDRESS CORRECTION ONLY:

Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

Your Montana Occupational Therapist / Assistant license will expire on June 15<sup>t</sup>.

In order to renew your License:

- 1) Complete this renewal application.
- 2) Complete the Continuing Education Attest Statement below.
- 3) Answer the disciplinary question at the bottom of the form.
- 4) To renew on **ACTIVE status**, submit a check or money order for **\$110.00** made payable to the Board of Occupational Therapy Practice. Do not send cash. Canadian residents pay in U.S. funds only.
- 5) Renewals postmarked after June 15 will be assessed a late renewal fee of \$40.00, increasing the total amount due to \$150.
- 6) To renew on **INACTIVE status**, submit a check or money order for **\$50** made payable to the Board of Occupational Therapy Practice. Do not send cash. Canadian residents pay in U.S. funds only. Renewals postmarked after June 15 will be assessed a late renewal fee of \$40.00, increasing the total amount due to \$90.
- 7) Sign the renewal application.
- 8) Return the renewal application and fee to the Board office by June 15.

IT IS YOUR RESPONSIBILITY TO KEEP THE BOARD OFFICE APPRISED OF YOUR CURRENT MAILING ADDRESS.

CONTINUING EDUCATION ATTEST STATEMENT

You are required to obtain 10 hours of continuing education (CE) taken within the 12 months prior to June 15, 2006, in order to renew your license. The Board will be conducting a random audit of licensees during the renewal cycle to ensure compliance. If you are among those selected, you will be notified after June 15 to submit documentation that you have completed the requirement. The Board will handle any CE non-compliance, determined by the audit, as a disciplinary matter.

Licensees who have not been licensed for a full year are exempt from the CE requirement but must complete the renewal form and pay the renewal fee.

I have completed the required hours of continuing education \_\_\_\_\_yes \_\_\_\_\_no  
I do not need continuing education; I have been licensed less than one year. \_\_\_\_\_Yes  
I do not need continuing education, I am renewing on Inactive status. \_\_\_\_\_ Yes

I declare under penalty of perjury that the above statement is true. I am aware that a false statement may lead to license discipline.

Incomplete or unsigned renewal applications will not be processed and will be returned to you for completion.

PLEASE BE ADVISED THAT YOU CANNOT WORK ON AN EXPIRED LICENSE. SHOULD YOU WORK WITHOUT A VALID, CURRENT LICENSE, DISCIPLINARY ACTION CAN BE TAKEN.

LEGISLATION PASSED IN THE 2005 SESSION PROVIDES THAT A LICENSEE HAS 45 DAYS TO RENEW HIS/HER LICENSE AFTER THE DEADLINE BY PAYING BOTH THE RENEWAL FEE AND THE LATE FEE. ANYONE RENEWING 46 DAYS OR MORE AFTER THE DEADLINE MAY HAVE A COMPLAINT FILE OPENED, AND THE POSSIBILITY OF UNLICENSED PRACTICE WILL BE ADDRESSED BY THE BOARD THRU ITS DISCIPLINARY PROCESS.

☐ Yes ☐ No - Have any legal or disciplinary actions been instituted against you since your renewal? If so, please attach copies of the document that initiated each action and all final orders. Mont. Code Ann. 37-1-105 requires that you report this information. Failure to accurately furnish the information is grounds for denial or revocation of your license.

Your Signature: \_\_\_\_\_

Date: \_\_\_\_\_